

Major Donor and Independent Expenditure Committee Campaign Statement

(Government Code Sections 84200-84216.5)

MAJOR DONOR AND INDEPENDENT EXPENDITURE
COMMITTEE STATEMENT

Type or print in ink.

☐ Amendment

SEE INSTRUCTIONS ON REVERSE

| | | | |
|---|---|------------|----------------------------|
| Statement covers period from <u>01/01/2019</u> through <u>03/31/2019</u> | Date of election if applicable: (Month, Day, Year) _____ | Date Stamp | CALIFORNIA FORM 461 |
| | | | 1/3 |
| | | | For Official Use Only |

1. Name and Address Of Filer

NAME OF FILER

(Include name(s) of all affiliated entities whose contributions are included in this statement.)
American Medical Response

MAILING ADDRESS (NO. AND STREET)

CITY STATE ZIP CODE

Livermore CA 94581

RESPONSIBLE OFFICER

(If filer is other than an individual)

Jason Sorrick

AREA CODE/DAYTIME PHONE

2. Nature and Interests of Filer (Complete each applicable section.)

☐ A FILER THAT IS AN INDIVIDUAL MUST LIST THE NAME, ADDRESS, AND BUSINESS INTERESTS OF EMPLOYER OR, IF SELF-EMPLOYED, THE NAME, ADDRESS, AND NATURE OF THE BUSINESS

NAME OF EMPLOYER/BUSINESS

BUSINESS INTERESTS

ADDRESS OF EMPLOYER/BUSINESS

☒ A FILER THAT IS A BUSINESS ENTITY MUST DESCRIBE THE BUSINESS ACTIVITY IN WHICH IT IS ENGAGED

National medical transportation company.

☐ A FILER THAT IS AN ASSOCIATION MUST PROVIDE A SPECIFIC DESCRIPTION OF ITS INTERESTS

☐ A FILER THAT IS NOT AN INDIVIDUAL, BUSINESS ENTITY, OR ASSOCIATION MUST DESCRIBE THE COMMON ECONOMIC INTEREST OF THE GROUP OR ENTITY

3. Summary

(Amounts may be rounded to whole dollars.)

- Expenditures and contributions (including loans) of \$100 or more made this period. (Part 5.) \$ 31000.00
- Unitemized expenditures and contributions (including loans) under \$100 made this period..... \$ 0.00
- Total expenditures and contributions made this period. (Add Lines 1 + 2.) **SUBTOTAL** \$ 31000.00
- Total expenditures and contributions made from prior statement. (Enter amount from Line 5 of last statement filed. If this is the first statement for the calendar year, enter zero.) \$ 0.00
- Total expenditures and contributions (including loans) made since January 1 of the current calendar year. (Add Lines 3 + 4.).....**TOTAL** \$ 31000.00

4. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information contained herein is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 04/29/2019
DATE

By Jason Sorrick
SIGNATURE OF INDIVIDUAL DONOR OR
RESPONSIBLE OFFICER IF OTHER THAN AN INDIVIDUAL

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INDEPENDENT EXPENDITURE COMMITTEE AND
MAJOR DONOR COMMITTEE STATEMENT

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| | 2/3 |

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American Medical Response

5. Contributions (Including Loans, Forgiveness of Loans, and Loan Guarantees) and Expenditures Made

(If more space is needed, use additional copies of this page for continuation sheets.)

| DATE | NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | TYPE OF PAYMENT | DESCRIPTION OF PAYMENT (IF OTHER THAN MONETARY CONTRIBUTION OR LOAN) | CANDIDATE AND OFFICE, MEASURE AND JURISDICTION, OR COMMITTEE | AMOUNT THIS PERIOD | CUMULATIVE AMOUNT RELATIVE TO THIS CANDIDATE, MEASURE, OR COMMITTEE |
|-------------|--|---|---|--|-----------------------|--|
| 01/04/2019 | Lovingood for Supervisor 2020 Rancho Cucamonga CA 95624 ID: 1392781 Reference No: | <input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure | | Supervisor Robert Lovingood County Supervisor Other -- San Bernardino County San Bernardino County NO: 01 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | 1000.00 | Calendar Year \$ 1000.00 Other \$ |
| 01/22/2019 | Chuck Washington for Supervisor 2020 Riverside CA 92507 ID: 1376332 Reference No: | <input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure | | Supervisor Chuck Washington County Supervisor Other -- Riverside County Riverside County NO: 03 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | 1000.00 | Calendar Year \$ 1000.00 Other \$ |
| 01/22/2019 | Friends of Chuck Condor for City Council Ward 4 - 2017 Riverside CA 92507-2133 ID: 1389788 Reference No: | <input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure | | Candidate Chuck Condor City Council Member Other -- Riverside Riverside NO: 04 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | 500.00 | Calendar Year \$ 500.00 Other \$ |
| 01/22/2019 | Marion Ashley for Supervisor 2014 Riverside CA 92507 ID: 1236240 Reference No: | <input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure | | Supervisor Marion Ashley County Supervisor Other -- Riverside Riverside NO: 05 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | 1000.00 | Calendar Year \$ 1000.00 Other \$ |
| SUBTOTAL \$ | | | | | | |

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|------------|--|---|---|---|-----------------------|--|
| 02/07/2019 | Wells for Mayor 2108 La Mesa CA 91942 ID: 1361355 Reference No: | <input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure | | Bill Wells Mayor City -- El Cajon El Cajon NO: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | 500.00 | Calendar Year \$ 500.00 Other \$ |
| 02/20/2019 | Hagman for Supervisor 2022 Rancho Cucamonga CA 91730-3007 ID: 1407697 Reference No: | <input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure | | Curt Hagman County Supervisor County -- San Bernardino County San Bernardino County NO: 04 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | 2000.00 | Calendar Year \$ 2000.00 Other \$ |
| 03/25/2019 | Californians for Jobs and a Strong Economy Sacramento CA 95814 ID: 1275549 Reference No: | <input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure | | Californians for Jobs and a Strong Economy Economic NO: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | 25000.00 | Calendar Year \$ 25000.00 Other \$ |

SUBTOTAL \$ 31000.00

FPPC Form 461 (8/99)
For Technical Assistance: 916/322-5660